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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

15 10thce Lite ORM 3:51

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		xample: If ver the lin	typing, type es.	12FE 4M5	
Brad Carson for Senate, Inc.						
ADDRESS (number and street)	3103 Callaway Dr			1.		
Check if different		1111		 		
than previously reported. (ACC)	Claremore	1.1.1.1.	1 1		OK 74019	9
2. FEC IDENTIFICATION NUMBER ▼		CITY			STATE A	ZIP CODE A STATE ▼ DISTRICT
C C00391854	3	. IS THIS REPORT	×	NEW (N) OR	AMENDED (A)	OK 00
4. TYPE OF REPORT (Choose (a) Quarterly Reports:	ose One) (b)	12-Day PR	E-Election	Report for the	2 :	
,,			Primary	(12P)	General (12G)	Runoff (12R)
April 15 Quarterly Report (Q1) X July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3)			Conven	tion (12C)	Special (12S)	
		Election or	M	M D	1	in the State of
January 31 Year-End	Report (YE) (c)	(c) 30-Day POST-Election Report for the:				
			General	(30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election or	M N	1		in the State of
5. Covering Period 04	01	ž015	thro	ugh 0	6 30	2015
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mr. Brad Carson M. M. D. D. / Y. Y. Y.						
Signature of Treasurer Mr. Brad Carson Date 07 08 2015						
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.						
Office Use Only						EC FORM 3 (Revised 02/2003)